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March 12, 2008

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Commissioner for Patents**FROM: Michael J. Mazza**
30,775**FAX NO.:** (571) 273-8300**TELE. NO.:** 650.620.5318
FAX NO.: 650.620.6395**RE: U.S. Serial No: 10/822,850**
Attorney Docket No.: 0198.00**TOTAL NO. OF PAGES INCLUDING COVER: 12**

DOCUMENTS SUBMITTED:

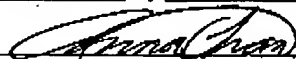
PTO/SB/21 Transmittal Form (1 page)
Reply Under 37 C.F.R. § 1.111 (7 pages)
PTO/SB/81 Power of Attorney (2 pages)
PTO/SB/96 Statement Under 37 CFR 3.73(b) (1 page)

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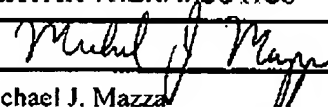
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/822,850	
	Filing Date	April 9, 2004	
	First Named Inventor	Michael John DUNKLEY, et al.	
	Art Unit	3771	
	Examiner Name	Shumaya B. ALI	
Total Number of Pages in This Submission	10	Attorney Docket Number	0198.00

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/96 Statement Under 37 CFR 3.73(b) and Facsimile Transmittal
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Firm Name	NEKTAR THERAPEUTICS		
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Printed name	Michael J. Mazza		
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